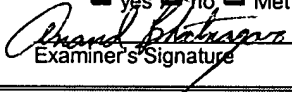



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SERIAL NUMBER 09/628,629	FILING DATE 07/31/2000  RULE	CLASS 382	GROUP ART UNIT 2623	ATTORNEY DOCKET NO. 8445/RMD	
<b>APPLICANTS</b>  Suhail S. Saquib, Shrewsbury, MA;  ** CONTINUING DATA ***** <div style="text-align: right; font-family: cursive;">Verified AB</div> ** FOREIGN APPLICATIONS ***** <div style="text-align: right; font-family: cursive;">Verified AB</div> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/19/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <div style="display: flex; justify-content: space-between;"><div style="text-align: center;"> Examiner's Signature</div><div style="text-align: center;"> Initials</div></div>		STATE OR  COUNTRY MA	SHEETS  DRAWING 12	TOTAL  CLAIMS 49	INDEPENDENT  CLAIMS 6
<b>ADDRESS</b> 20349 POLAROID CORPORATION PATENT DEPARTMENT 1265 MAIN STREET WALTHAM , MA 02451					
<b>TITLE</b> Aliasing artifact attenuation system					
FILING FEE  RECEIVED 1446	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		